



APPLICATION FOR TAX REBATE UNDER THE KINGMAN COUNTY
NEIGHBORHOOD REVITALIZATION PLAN

PART 1

(A non-refundable \$150.00 application fee must accompany this application)

OWNER'S NAME: _____ Day Phone No: _____
(Please Print)

Owner's Mailing Address: _____

Address of Property: _____ School District No: _____

Parcel Identification Number: _____

(Copy from your tax statement or call the County Assessor's Office)

Legal Description of Property: (Use additional sheets if necessary)

Proposed Property Use:

RESIDENTIAL: _____ NEW _____ REHAB _____ RENTAL _____ OWNER OCCUPIED
_____ RESIDENCE _____ OTHER _____
_____ Single Family _____ Multi-Family _____ No. of Units

COMMERCIAL:

_____ NEW _____ REHAB _____ RENTAL _____ OWNER OCCUPIED

INDUSTRIAL:

_____ NEW _____ REHAB _____ RENTAL _____ OWNER OCCUPIED

AGRICULTURE:

_____ NEW _____ REHAB _____ RENTAL _____ OWNER OCCUPIED

Does the applicant own the land? YES NO

Will the proposed project be on a foundation: YES NO

How will the proposed project be taxed? Personal Property Real Estate

Will it be permanently attached to the property? YES NO

I have read and do hereby agree to follow all application procedures and criteria. I further understand that this application will be void one year from the date below if improvements or construction has not begun on this project.

Signature of Owner

Date

APPLICATION FOR TAX REBATE-NEIGHBORHOOD REVITALIZATION PLAN
PART 2 (RESIDENTIAL)

GENERAL:

Estimated Date of Completion: _____

List of buildings proposed to be demolished: _____

ESTIMATED COST OF IMPROVEMENTS:

Materials \$ _____ Labor \$ _____
(Please attach copies of all cost documentation)

Total Cost \$ _____ (Must be over \$25,000 to qualify for rebate).

Amount of Owner Participation _____ Hours _____ Percent of Project _____ Value _____

NEW RESIDENTIAL:

Story Height _____ Basement Size _____ Heating & Cooling _____

Square Ft of Finished Living Area- Basement _____ Ground Floor _____ Upper Floor _____

Number of Bedrooms _____ Number of Bathrooms _____ Sq. ft. of Unfinished Area _____

Garage Size _____ () Attached () Detached

RESIDENTIAL REMODEL:

Square feet of Living Area added _____ () Basement () Ground FL () Upper FL

Rooms to be remodeled (Please mark all that apply)

() Living Room () Bedroom () Bathroom () Kitchen () Dining Room

() Basement () Other _____

Rooms to be added (Please mark all that apply)

() Living Room () Bedroom () Bathroom () Kitchen () Dining Room

() Basement () Other _____

Signature of Owner

Date

APPLICATION FOR TAX REBATE – NEIGHBORHOOD REVITALIZATION PLAN
PART 3 (COMMERCIAL OR AGRICULTURAL)

GENERAL:

Estimated Date of Completion: _____

List of buildings proposed to be demolished: _____

ESTIMATED COST OF IMPROVEMENTS:

Materials \$ _____ Labor \$ _____

(Please attach copies of all cost documentation)

Total cost \$ _____ (Must be over \$25,000 to qualify for rebate).

Please check one of the following that best describes the construction of your property:

() All Contractor Built (Turnkey) () Pre-built Unit moved on site () Modular Building

() Contractor built with owner participation () all owner built () Other

Amount of Owner Participation _____ Hours _____ Percent of Project _____ Value

AGRICULTURAL:

Type of Building _____ Use of Building _____

Size of Building _____ Wall Height _____ Exterior Wall Material _____

AGRICULTURAL OR COMMERCIAL REMODEL

Area to be Remodeled _____ Type and Use of Building _____

Describe Improvements:

Signature of Owner

Date

APPLICATION FOR TAX REBATE-NEIGHBORHOOD REVITALIZATION PLAN
PART 4 (COMMENCEMENT OF CONSTRUCTION)

Parcel Identification Number: _____

Date of Original Application: _____

Construction estimated to begin on: _____

Building Permit Number: _____(Where applicable)

Estimated Date of Completion of Construction: _____

Owner's Signature _____ Date _____



APPLICATION FOR TAX REBATE – NEIGHBORHOOD REVITALIZATION PLAN
PART 5 (STATUS OF CONSTRUCTION COMPLETION)

Parcel Identification Number: _____

Original Application Date: _____

The project was completed before January 1 following commencement () YES () NO

The Construction project applied for was considered complete on _____

Owner's Signature _____ Date _____

TAX REBATE PROGRAM- NEIGHBORHOOD REVITALIZATION PLAN
CRITERIA FOR COMMERCIAL & INDUSTRIAL PROPERTIES
NEW & REHABILITATION PROJECTS

Increase in Appraised Value of:

\$25,000 to \$500,000			\$500,000 to \$3,000,000			\$3,000,000 +		
1,2,3	Yr.	95%	1-6	Yr.	95%	1-6	Yr.	95%
4	Yr.	80%	7	Yr.	70%	7-10	Yr.	70%
5	Yr.	70%	8	Yr.	60%			
6	Yr.	60%	9	Yr.	50%			
7	Yr.	50%	10	Yr.	20%			
8	Yr.	50%						
9	Yr.	30%						
10	Yr.	20%						

CRITERIA FOR RESIDENTIAL PROPERTY
NEW & REHABILITATION PROJECTS

There is a cap on the appraised value that will go towards the rebate of \$250,000.00.

Increase in Appraised Value of \$25,000 to \$250,000.00:

1	Yr.	70%
2	Yr.	50%
3	Yr.	30%
4	Yr.	20%
5	Yr.	10%

The rebates will commence in the tax year after completion of Plan Improvements.

*A minimum of \$25,000 must be invested

*A \$150.00 up front, non-refundable application fee will be charged to cover the Appraiser's office time and administration.

*Shall include the rehabilitation of existing structures and/or additions to existing structures and new construction.

*The intended purpose of use of structure will determine if project is commercial or residential.

* Multi-family structures and agriculture will be considered commercial.

 Owner's Signature

 Date